

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)			Application Number 10/807,935		Filing Date 24 March, 2004		<input type="checkbox"/> To be Mailed						
			Applicant(s) DENISON ET AL.						Page 1 of 1				
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 11/05/2007		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1			0				51						
2				0			52						
3				0			53						
4				0			54						
5				0			55						
6				0			56						
7				0			57						
8				0			58						
9				0			59						
10				0			60						
11				0			61						
12				0			62						
13				0			63						
14				0			64						
15				0			65						
16				0			66						
17				0			67						
18				0			68						
19				0			69						
20				0			70						
21				0			71						
22			1				72						
23				0			73						
24				1			74						
25			1				75						
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27				0			77						
28			1				78						
29				1			79						
30				0			80						
31				0			81						
32			1				82						
33				1			83						
34			1				84						
35			1				85						
36				0			86						
37			1				87						
38				1			88						
39				0			89						
40				0			90						
41			1				91						
42				1			92						
43			1				93						
44			1				94						
45				0			95						
46			1				96						
47				1			97						
48				0			98						
49							99						
50							100						
Total Indep			12				Total Indep						
Total Depend				6			Total Depend						
Total Claims			18				Total Claims						

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